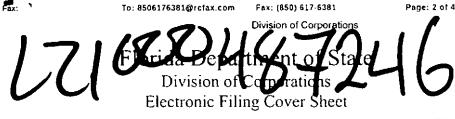
To: 8506176381@rcfax.com

Fax: (850) 617-6381

Page: 2 of 4

11/15/2021 2:33 PM



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000421944 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : SMITH HULSEY & BUSEY

Account Number: 075030000653 Phone : (904)359-7700 : (904)359-7708 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: dar@vdf-law.com

FLORIDA LIMITED LIABILITY CO.

Conchs & Bruises, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((H210004219443)))

ARTICLES OF ORGANIZATION OF

CONCHS & BRUISES, LLC

The undersigned organizer, who is the authorized representative of Conchs & Bruises, LLC_(the "Company") under the Florida Revised Limited Liability Company Act, hereby adopts the following Articles of Organization.

ARTICLE I - NAME

The name of the Company is Conchs & Bruises, LLC

ARTICLE II - PRINCIPAL OFFICE

The street address and the mailing address of the principal office of the Company are One Independent Drive, Suite 3300, Jacksonville, Florida, 32202.

<u> ARTICLE III - INITIAL REGISTERED AGENT AND ADDRESS</u>

The name and street address of the initial registered agent are Smith Hulsey & Busey Professional Association and One Independent Drive, Suite 3300, Jacksonville, Fl 32202.

ARTICLE IV - MANAGEMENT

The Company shall be a manager-managed company. The name of the initial manager is Van D. Fischer.

IN WITNESS WHEREOF, the undersigned authorized representative has executed the foregoing Articles of Organization on the 15th day of November 2021.

Jeanne Helton

Authorized Representative

(((H21000421944 3)))

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, CONCHS & BRUISES, L.L.C, A FLORIDA LIMITED LIABILITY COMPANY, SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the Limited Liability Company is Conchs & Bruises, L.L.C.
- 2. The name and street address of the initial registered agent are Smith Hulsey & Busey Professional Association and One Independent Drive, Suite 3300, Jacksonville, FL 32202.

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, Smith Hulsey and Busey Professional Association hereby accepts the appointment as registered agent and agrees to act in this capacity. Smith Hulsey and Busey Professional Association further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of his position as registered agent as provided for in Chapter 605, F.S.

Date: November 15th, 2021

Carneni DICA

01130285